

Facsimile Transmittal Sheet


To: EXAMINER SHEIKH
Location: USPTO
FAX Number: 703, 746-9256 Number of Pages
Date: May 1, 2003 Including Cover Sheet: 2
From: ALAN RUBIN
Location: WILMINGTON, DELAWARE
Telephone No.: 302, 478-0838

NOTES:

Thank you for referring me to the Office of Enrollment & Discipline for discussions on the involvement of attorney Kendrick Colton in the current USPTO review of US Patent Application # 09/835,482. As you know, it is my position based on phone conversations with attorney Colton and his letter to me of January 10, 2003 (copy to you on April 24, 2003) that he is not a participant in this process. Nevertheless, in order to further support the position that Kendrick Colton is not my legal representative, I have been advised to submit the enclosed "Revocation of Power of Attorney or Authorization of Agent form".

I look forward to your response.

Alan Rubin

36/ Rev & Power
B. AttyPlease type a plus sign (+) inside this box → 

PTO/SB/8240-00)

Approved for use through 10/31/2002. OMB 0851-0035

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

**REVOCATION OF POWER OF
ATTORNEY OR
AUTHORIZATION OF AGENT**

Application Number	08/835,482
Filing Date	April 8, 1997
First Named Inventor	Alan A. Rubin
Group Art Unit	1615
Examiner Name	Sheikh
Attorney Docket Number	7483/73068

Bet
5-6-03

I hereby revoke all previous powers of attorney or authorizations of agent given in the above-identified application:

☐ A Power of Attorney or Authorization of Agent is submitted herewith.

OR


☒ Please change the correspondence address for the above-identified application to:☐ Customer Number Place Customer
Number Bar Code
Label here

OR

<input checked="" type="checkbox"/> Firm or Individual Name	ALAN A. RUBIN, PhD				
Address	207 HITCHING POST DRIVE				
Address					
City	WILMINGTON				
Country	USA	State	DE	ZIP	19803
Telephone	302-478-0838	Fax			

I am the:

☒ Applicant/Inventor.☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)**SIGNATURE of Applicant or Assignee of Record**

Name	ALAN A. RUBIN
Signature	
Date	APRIL 29 2003

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☐ *Total of 1 forms are submitted.

Burden Hour Statement: This form is estimated to take 3 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.